



AP/1615

Docket No. 02296.002320
Date: May 5, 2004

NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

In re Application of: CHRISTINE NICOL ET AL.

Application No.: 09/806,915

For: ANIMAL STEREOTYPY

Filed: November 13, 2001

Group Art Unit: 1615

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

May 5, 2004
(Date of Deposit)

Raymond R. Mandra (Reg. No. 34,382)
(Name of Attorney for Applicant)


Signature

May 5, 2004
Date of Signature

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision dated November 5, 2003 of the Primary Examiner finally rejecting claims 1-18, 22-25, 28-30, and 34.

The items checked below are appropriate.

1. ☒ A Petition for a three month extension of time to respond to the final rejection, together with the \$ 950.00 extension fee under 37 C.F.R. §1.17, is being filed herewith.
2. ☐ A Petition for an additional _____ month extension of time to take further action, together with the \$ _____ extension fee under 37 C.F.R. §1.17, was filed on _____.
3. ☒ Fee \$330.00
- ☐ Fee \$165.00 (Verified Statement claiming small entity status is enclosed, if not filed previously.)

☒ Enclosed


☐ Not required (fee paid in prior appeal)

☐ Charge to Deposit Account No. 06-1205 (One additional copy of this Notice enclosed herewith)

4. ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 or 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.

5. ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

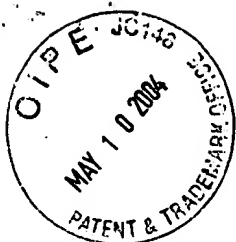


Raymond R. Mandra
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Form #67

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AMENDMENT UNDER 37 C.F.R. § 1.116
GROUP ART UNIT 1615, EXPEDITED PROCEDURE

In re Application of:

CHRISTINE NICOL ET AL.

Application No.: 09/806,915

Filed: November 13, 2001

For: ANIMAL STEREOTYPY

Docket No. 02296.002320

Examiner: Blessing M. Fubara

Group Art Unit: 1615

Date: May 5, 2004

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 47	MINUS	** 62	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 5	MINUS	*** 5	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290 - previously paid for						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00


* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☒ A check in the amount of \$ 950.00 to cover the fee for a three month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Raymond R. Mandra
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Registration No. 34,382

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